

JO Rec'd PCT/PTO 27 FEB 2002



TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

| | | | |
|---|----|------------------------|--------------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | | Application Number | 09/769,953 |
| | | Filing Date | Jan 25, 2001 |
| | | First Named Inventor | |
| | | Group Art Unit | Unknown |
| | | Examiner Name | Unknown |
| Total Number of Pages in This Submission | 97 | Attorney Docket Number | LEX-0118-PCT |

RECEIVED

MAR 15 2001

OFFICE OF PETITIONS

ENCLOSURES (check all that apply)

| | | |
|--|---|---|
| <input type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Assignment Papers (for an Application) | <input type="checkbox"/> After Allowance Communication to Group |
| <input type="checkbox"/> Fee Attached | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> Appeal Communications to Board of Appeals and Interferences |
| <input type="checkbox"/> Amendment/Response | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communications to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> To Convert a Provisional Application | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Terminal Disclaimer | return postcard; |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Small Entity Statement | Petition Under 37 C.F.R. § 1.182 with Exhibits A-D |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> Request of Refund | |
| <input type="checkbox"/> Response to Missing Parts/Incomplete Application | Remarks | |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | |
|-------------------------|------------------------------------|
| Firm or Individual name | Lance K. Ishimoto, Reg. No. 41,866 |
| Signature | |
| Date | March 9, 2001 |

CERTIFICATE OF MAILING

| | | | |
|------------------------------------|----------------|------|---------------|
| Express Mail No. EL 672 756 440 US | | | |
| Typed or printed name | Michelle Klein | | |
| Signature | Michelle Klein | Date | March 9, 2001 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.